

SPRING 2026

Hoag *for* Life



The Best Team for
Complex Hearts

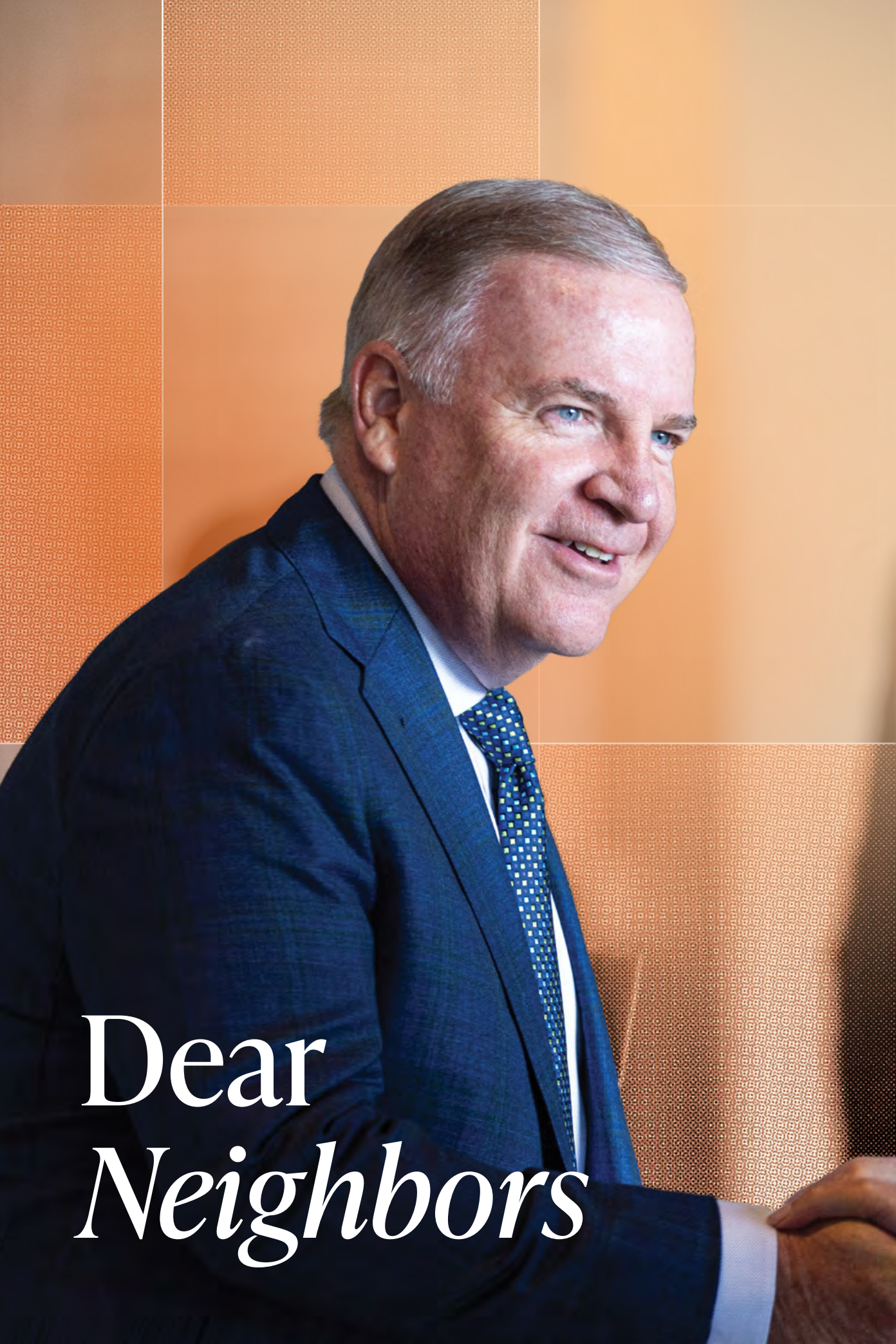
The surgeons who say “yes”
when others can’t.

Closing the Gap
in Life-Saving Care

Why Orange County’s transplant
void became Hoag’s mission.

hoag.

Cardiac surgeons Dr. Matthew Wingo,
Dr. Jack Sun, Dr. Ryan Bedi, Dr. Yuichi Ishida



Dear Neighbors



Dear Neighbors,

Every edition of *Hoag for Life* reflects something essential about who Hoag is – not just as a health system but as a community partner. This spring, that spirit is captured in a simple but powerful idea: meeting people where they are, before illness has the chance to take hold.

Across these pages, you'll find stories of innovation, compassion, and collaboration – moments large and small that demonstrate how Hoag shows up for the people we serve.

One such moment stands out as a powerful example of our mission in action.

In recent outreach efforts, caregivers from Hoag's Digestive Health Institute brought innovative esophageal cancer screening directly to Orange County firefighters, people who dedicate their lives to protecting others. Esophageal cancer is among the fastest-rising cancers in the United States, yet symptoms are often silent until the disease is advanced. Early screening can dramatically change outcomes.

What made this effort especially meaningful was not just who participated but how we conducted screening. Hoag is among the first health systems in the nation to adopt a noninvasive DNA-based screening tool that detects precancerous changes in the esophagus without sedation in just a few minutes during a routine visit. Patients swallow a tiny, tethered capsule that collects cells as it is gently retrieved. Those cells are then analyzed to uncover molecular changes long before cancer would otherwise be diagnosed.

During this outreach, more than 150 firefighters were referred for the screening, with 117 completing tests and 10 returning positive results, offering a lifeline of early intervention that would have been missed without proactive care.

This work reflects something deeper about our mission: a focus on prevention equally with treatment. It shows how cutting-edge technology, when paired with clinical expertise and community engagement, can change lives well before disease progresses. It's innovation in service of humanity.

As you explore this edition of *Hoag for Life*, I hope these stories offer insight into the many ways Hoag continues to invest in the health of our community, today, and for the future.

Thank you for the privilege of being your partner in health.

Robert T. Braithwaite

Robert T. Braithwaite
President and Chief Executive Officer
Hoag Memorial Hospital Presbyterian

*Pictured above:
Dr. Phoenix Nguyen,
gastroenterologist*



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What's *New* at Hoag

From new facilities and programs to expanded services and access, discover the updates that matter most – and how they're improving the way patients experience care at Hoag.

What's New at Hoag

Building What's Missing: Hoag's Path Toward Organ Transplant Care

For years, Orange County patients facing advanced liver disease needed to leave their community for transplant care, traveling long distances during some of their most medically and emotionally vulnerable moments.

That's going to change.

Hoag is actively developing a comprehensive abdominal transplant program to bring advanced liver and kidney transplant care closer to home for Orange County patients and families.

But the path toward organ transplantation at Hoag began with recognition, not the operating room.

In early 2019, physicians identified a rapid rise in liver disease across Orange County and a clear need for more advanced, coordinated care. Rather than immediately pursuing transplant surgery, Hoag made a deliberate decision

at that time: to build a comprehensive liver program focused on early detection, advanced treatment, and long-term disease management, allowing many patients to be treated without transplant while laying the groundwork to support transplantation when clinically necessary.

That foundation took shape in 2021 with the recruitment of Dr. Tse-Ling Fong, a nationally recognized transplant hepatologist who previously led liver transplant programs at both Keck Medicine of USC and Cedars-Sinai.

Under his leadership and thanks to philanthropic support, Hoag invested in noninvasive technologies such as FibroScan, enabling physicians to identify liver disease earlier, better understand patient risk, and intervene before serious complications arise.

As patient demand grew, Hoag recruited Dr. Brian Lee as co-director of the liver program



L: Dr. Brian Lee, transplant hepatologist



Dr. Kenneth Chang, interventional gastroenterology



Dr. Patrick Lee, transplant hepatologist



L: Dr. Tse-Ling Fong, transplant hepatologist

in late 2022, followed by Dr. Patrick Lee in 2025. Together, the team expanded advanced protocols to manage cirrhosis, autoimmune liver disease, and chronic hepatitis B, developing an integrated alcohol-related liver disease clinic designed to treat both the medical and human dimensions of chronic illness.

During this period, Hoag also became one of the few hospitals in the region offering coordinated pre- and post-transplant care for patients receiving transplant surgery elsewhere. To date, Hoag has supported more than 90 liver transplant recipients. By 2025, the program was caring for more than 12,000 patients annually, making it one of the largest and fastest-growing liver programs in the region.

That growth underscored a disquieting reality.

Despite being home to more than 3.1 million residents, Orange County currently does not have a liver transplant program.

By comparison, San Diego County, with a similar population, supports two.

For local families, this absence often means leaving their support systems and trusted physicians at the moment stability matters most.

Hoag leadership viewed that reality not as a market opportunity but as a responsibility.

Further strengthening Hoag's trajectory was the July 2024 appointment of Dr. Kenneth Chang as Executive Medical Director of Hoag's Digestive Health Institute. Under his leadership, the Institute expanded its academic profile and accelerated recruitment of nationally recognized physician leaders.

Transplantation demands more than surgical skill. It requires systems – and Hoag has been methodically building them.

Hoag's privademic model, which combines academic-level clinical expertise with the agility of a high-performing community health system, has enabled this progress.

The direction is clear: Hoag is laying the foundation for a comprehensive liver and kidney transplant center designed to keep patients close to home, supported by teams they already know and trust, with the first transplants anticipated in 2027.

Because world-class, life-saving care should not require leaving Orange County. ●

Learn more about Hoag's Digestive Health Institute at hoag.org/digestivehealth.

Redefining Pain Care: Hoag's Comprehensive Approach to Relief

What's New at Hoag

Dr. Aaron Przybysz
Pain management specialist

Chronic pain doesn't exist in isolation. It can disrupt sleep, limit movement, strain mental health, and erode the ability to work or enjoy daily life. For millions of Americans, pain becomes not just a symptom, but a condition that affects every part of their well-being.

At Hoag, pain is no longer treated episodically or passed between specialties. In fall 2025, Hoag opened its dedicated Interventional Pain Center, expanding the Center for Pain Management into a purpose-built facility designed to deliver coordinated, comprehensive care for patients living with complex pain.

"In many health systems, pain care is fragmented," says Dr. Aaron Przybysz, John L. Curci Family Endowed Chair in Pain Management and Medical Director of the Center for Pain Management.

"Chronic pain management is more than prescribing medication and sending a patient on their way. It requires a holistic, team-based approach focused on restoring function and quality of life."

More than 20% of Americans live with chronic pain, a figure expected to rise as the population ages. Left inadequately treated, pain can interfere with mobility, nutrition, sleep, mental health, and recovery from other medical conditions, often compounding health challenges over time.

Hoag's pain management program is integrated across the health system, supporting patients through spine care, cancer treatment, digestive conditions, women's health, and surgical recovery. The team brings together board-certified specialists in pain medicine, anesthesiology, neurology, psychiatry, and

addiction care, supported by a dedicated care navigator who helps guide patients through every stage of treatment.

The new Interventional Pain Center reflects that coordinated approach. Bringing consultation, diagnostics, and advanced procedures together under one roof, the facility streamlines access and strengthens collaboration across specialties.

Patients begin with a comprehensive assessment and a personalized plan that emphasizes noninvasive, evidence-based therapies. When appropriate, care may progress to targeted interventions such as image-guided injections, ablations, or neuromodulation – delivered in a setting designed specifically for comfort, safety, and continuity.

Equally important are non-pharmacologic strategies that support long-term wellness. Patients may benefit from physical therapy, virtual-reality-based pain modulation, mindfulness techniques, and personalized guidance on sleep, nutrition, and movement – approaches shown to reduce reliance on medication while improving daily function.

"Our goal is to create a center of excellence that brings together science, technology, and compassion," Dr. Przybysz says. "By placing patients at the center of coordinated, forward-thinking care, we're setting a new standard for how pain is treated."

And helping patients move forward – beyond pain and back to living. ●

Learn more about Hoag's Center for Pain Management at hoag.org/pain-management.

In the *Best Hands*

Meet the people behind the care. Go inside Hoag's care teams to spotlight physicians whose expertise, judgment, and compassion shape every patient experience – and whose commitment is felt long before, during, and after treatment.

In the Best Hands

Built for Complexity: Meet Hoag's Cardiac Surgeons

**A complex heart diagnosis raises urgent questions:
How serious is my condition? Who has the expertise
to treat it? Where can I find care I can trust?**

At Hoag's Jeffrey M. Carlton Heart & Vascular Institute, those questions are answered by a deeply experienced team prepared to take on the most challenging cases – while maintaining a strong commitment to individualized, patient-centered care.

The expansion of Hoag's cardiac surgery program reflects a strategic investment in advanced cardiac care. By strengthening surgical expertise, hybrid operating environments, specialized cardiovascular intensive care, and integrated case management, Hoag has built a program designed around multidisciplinary teams equipped to manage the full continuum and complexity of cardiac disease.

That collaboration extends beyond the operating room. Cardiac surgeons work closely with cardiologists across imaging, interventional

cardiology, heart failure, and electrophysiology to evaluate each case from multiple perspectives, ensuring patients benefit from coordinated decision-making and comprehensive care plans.

"Hoag is known for taking a deeply collaborative approach to complex cardiac procedures," says Dr. Jack Sun, Director of Cardiovascular Surgery.

"Our surgeons, cardiologists, anesthesiologists, intensivists, and nursing teams work together to support the best possible outcomes for each patient."

This team-based model is validated by Hoag's Society of Thoracic Surgeons' highest rating, placing it among the nation's highest-performing cardiac surgery programs – a distinction achieved by only about 10% of hospitals nationwide.



Cardiac surgeons Dr. Matthew Wingo, Dr. Jack Sun, Dr. Ryan Bedi, Dr. Yuichi Ishida

At the heart of the program is a focus on personalized care, says Dr. Yuichi Ishida, Director of Cardiac Surgery Mechanical Support. "At Hoag, we partner with patients and their families to develop individualized care plans," Dr. Ishida says. "Those plans are shaped by a coordinated team with the experience, technology, and resources needed to treat complex heart conditions."

That preparation is especially meaningful for patients who may have been told elsewhere that their cases are too complicated to treat, says Dr. Ryan Bedi, a cardiac surgeon who specializes in aortic surgery.

"Patients with complex heart conditions are often told 'no' before arriving at Hoag," Dr. Bedi says. "They are relieved when they come here and hear 'yes.' That may include patients

requiring advanced support, complex reoperative surgery, or coordination across multiple cardiac subspecialties. At Hoag, we have a team prepared to evaluate every option and work together toward the best possible outcome."

For cardiac surgeon Dr. Matthew Wingo, the program's strength lies in readiness – not just in the operating room, but across the entire system of care.

"The community trusts us because this is where people come when their heart needs are complex," Dr. Wingo says. "That trust reflects the preparation behind the scenes – the teams, the infrastructure, and the ability to respond when situations escalate quickly. They put their trust in our hands, and we hold that as our greatest responsibility." ●

Learn more about Hoag's Jeffrey M. Carlton Heart & Vascular Institute at [hoag.org/heart](https://www.hoag.org/heart).

In the Best Hands

Meet Hoag's Team-Based Approach to Prostate Cancer Care

A prostate cancer diagnosis brings complex decisions. For many patients, the challenge isn't a lack of options; instead, it's understanding which option is right for them.

At Hoag, innovation in prostate cancer care is defined by choice. As a privademic health system, Hoag combines the personalized approach of private medicine with the research rigor, advanced technology, and multidisciplinary collaboration more often associated with academic centers.

The result is a comprehensive program that offers the full spectrum of diagnostic and treatment options, guided by teams that help patients navigate decisions with clarity and confidence.

At Hoag, urologic oncologists work closely with radiation oncologists, medical oncologists, radiologists, pathologists, and advanced imaging specialists, reviewing each case together to ensure every treatment recommendation reflects both clinical expertise and the patient's goals.

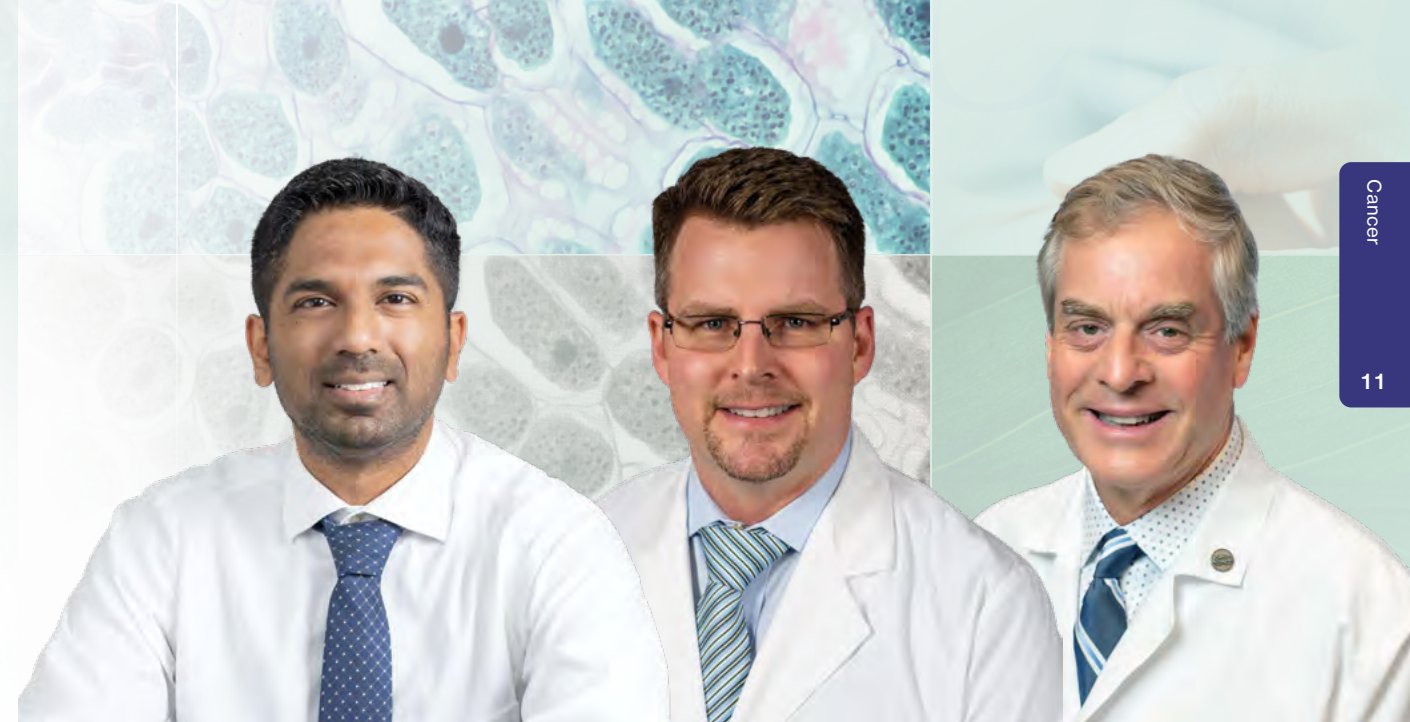
"Prostate cancer is unique because there are often multiple appropriate treatment paths," says Dr. Robert Torrey, Co-Medical Director, Urologic Oncology, who serves alongside Dr. Jeffrey Bassett, Benjamin & Carmela Du Endowed Chair in Urologic Oncology, Co-Medical Director, Urologic Oncology. "Our responsibility is to ensure

patients truly understand their options – and that every option is available to them."

Hoag is one of the few centers in the region to offer all major prostate cancer treatment modalities within one coordinated program. Routine surgical options at Hoag include the most advanced minimally invasive approaches, such as single-port robotic surgery and high-intensity focused ultrasound; transperineal prostate biopsies employing fused MRI/ultrasound guidance for improved safety and accuracy; and specialized services for higher-risk prostate cancer patients.

Surgical innovation at Hoag continues to advance with the introduction of haptic-enabled robotic technology, which restores a sense of touch during prostate cancer surgery. For patients, this matters because preserving urinary and sexual function is often one of the greatest concerns after treatment. By allowing surgeons to better feel tissue boundaries and subtle differences in anatomy, this technology supports more precise dissection around critical nerves and structures – helping remove cancer effectively while reducing the risk of unintended injury that can impact quality of life after surgery.

Complementing surgical approaches, radiation therapy is a key treatment modality for many



Dr. David Benjamin, urologic oncologist; Dr. Jeffrey Bassett, urologic cancer surgeon; Dr. Craig Cox, radiation oncologist

patients with prostate cancer. Hoag's ViewRay MRIdian system allows physicians to visualize tumors using MRI imaging before and during radiation treatment – a capability available at only about 40 sites worldwide and supported by one of the most experienced radiation oncology teams in Southern California. As the most advanced imaging and treatment modality for stereotactic body radiation therapy, the ViewRay MRIdian allows Hoag to treat most prostate cancers in five treatment fractions.

"This level of imaging precision allows us to adapt treatment in real time," says Dr. Craig Cox, Medical Director of Radiation Oncology at Hoag. "It gives us confidence that we're targeting the cancer while protecting surrounding healthy tissue."

Beyond surgery and radiation, Hoag's molecular imaging and systemic therapy programs provide advanced options for patients with more complex or metastatic disease.

"In prostate cancer, innovation isn't just about the device we use," says Dr. Rafi Ahmed, a urologic cancer medical oncologist who, with colleague Dr. David Benjamin, treats patients at Hoag. "It's about how we integrate imaging, biomarkers, and systemic therapy to personalize care. When our teams collaborate from the

beginning, we can tailor treatment to the biology of the disease and the goals of the patient."

With support from generous donors, innovation in prostate cancer care at Hoag extends across the patient journey to include next-generation biomarker-based screening strategies. This program helps identify patients with higher-risk disease who may benefit from earlier intervention, while allowing others with low-risk cancer to be safely observed without unnecessary treatment.

Throughout the process, Hoag patients remain active participants in their care. Physicians collaborate closely across urology, radiation oncology, medical oncology, imaging, and pathology to review each case together, ensuring recommendations reflect both clinical insight and patient priorities.

"At Hoag, innovation isn't something we adopt once. It's something we continuously build," says Dr. Kevin Lin, radiation oncologist at Hoag. "Our privademic model allows us to bring new technologies and research directly to patients, while keeping care personal, coordinated, and centered on what matters most to them." ●

Learn more about the Hoag Family Cancer Institute at [hoag.org/cancer](https://www.hoag.org/cancer).

More Than *a Diagnosis*

Healing is more than medicine. These stories follow patients and families through uncertainty, courage, and hope – and the human connections that make care deeply personal.

More Than a Diagnosis

Not Just a Haircut

How compassionate care helped Cindy reclaim her life after brain surgery

For more than a decade, Cindy Lightner struggled to make sense of the way she was feeling. From emotional changes to memory loss, depression, and relentless fatigue, doctors attributed her symptoms to menopause.

“Despite being on hormone therapy, I had this kind of erratic rage that just wouldn’t go away,” she recalls. “It took a toll on many of my relationships.”

Over time, her symptoms worsened and reached a breaking point during a trip to Italy with friends.

“One of my oldest friends pulled me aside and told me she knew something wasn’t right with me,” Cindy says. “I was misplacing everything. I was sleeping more and eating less. I had lost my sense of taste. And the big one was that I was limping.”

| At one point I just blurted out, ‘I think I have a brain tumor.’”

When Cindy returned home, she went to Hoag. A series of tests and scans confirmed her instincts were correct. A 10-centimeter mass was impacting every area of her brain, including her frontal lobe – the part of the brain responsible for regulating emotions and behavior.

She met with neurosurgeon Dr. Ezequiel Goldschmidt, who explained that removing the mass would require a craniotomy, a procedure in which a portion of the skull is temporarily removed and then secured with plates and screws.

For many patients, one of the most distressing aspects of brain surgery is scalp shaving, which can significantly affect self-esteem and sense of identity. Dr. Goldschmidt offered Cindy a different option through *Styled for Surgery*, a Hoag program he developed with philanthropic support.

“He said instead of shaving the entire side of my head, he would work with me and a hair stylist to shave only the line where the incision would be,” Cindy says.

“Brain surgery can be incredibly personal and emotionally overwhelming,” Dr. Goldschmidt says.

“*Styled for Surgery* is designed with the understanding that how patients feel about themselves matters deeply to healing. Preserving their hair and involving them in the process helps maintain dignity and confidence during a vulnerable time.”

The day before surgery, Dr. Goldschmidt marked the incision site. Cindy then met with professional hair stylist Loni Kohlmyer to plan a hairstyle that concealed the incision.

“While Loni was cutting, she took photos and sent them to Dr. Goldschmidt,” Cindy says. “My hair was the last thing I had to worry about. People who saw me afterward had no idea I’d had brain surgery.”

Following her procedure, pathologists determined the tumor was rare but benign. Shortly after surgery, Cindy noticed a dramatic shift.

“It felt like waking up from a very long sleep,” she says. “I had energy again. I hadn’t felt that great in years.”

Though recovery continues, Cindy recently experienced one of her proudest moments – dancing with her son and daughter-in-law at their wedding.

“Looking at where I was to where I am now,” she says, “it feels like a miracle.” ●

Learn more about Hoag’s Pickup Family Neurosciences Institute at hoag.org/neurosciences.



Photo by Danirae Dunn



More Than a Diagnosis

Reclaiming Her Reflection: A Breast Cancer Survivor's Reconstruction Journey

Before coming to Hoag, Lynn Hardin endured significant physical and emotional challenges after breast reconstruction surgery at another health system.

“Our breasts are deeply tied to how we see ourselves as women,” Lynn says. “When the outcome wasn’t what I had prepared for, I had to confront not just healing from cancer but healing from the aftermath. There were moments I didn’t recognize my own reflection.”

A routine mammogram had detected cancer in her left breast. Given her family history of the disease and long-term health goals, she chose to undergo a mastectomy with immediate reconstruction.

A 10-hour procedure addressed the cancer, but the recovery was complicated by a severe infection and tissue necrosis.

“Because of the infection, additional tissue had to be removed, which left me significantly asymmetrical,” Lynn says. “The imbalance caused real shoulder and neck pain, and it was a daily reminder that my recovery wasn’t complete. I was grateful the cancer had been treated, but survival alone wasn’t the full picture for me. I wanted thoughtful, corrective care and a result I could live comfortably with. That’s when I chose to seek another opinion.”

That’s when Lynn turned to Hoag for help.

There, she met with Dr. Raquel Minasian, a plastic and breast reconstructive surgeon at Hoag’s Sue J. Gross Comprehensive Breast Center.

“During my consultation, Dr. Minasian gave me a big hug and said, ‘I’m going to take care of this. I’m going to take care of you.’ She was just so incredibly knowledgeable and kind.”

To address the complications from the infection, Dr. Minasian removed residual scar tissue, placed an implant, and performed fat grafting to restore contour and balance. A second procedure included a lift and nipple reconstruction on the opposite breast to achieve symmetry.

“When I meet with a patient and I learn their story, I put myself in their shoes,” Dr. Minasian says. “I think about all the things I’d want to know if I was going through what they are, and I make sure they are as informed as possible.”

While Lynn’s physical transformation has restored her confidence in her body and her future, the expertise, compassion, and patience of her care team has been just as important to her healing journey.

“I look in the mirror now and recognize myself,” she says. “This experience reminded me that I have a voice in my own care. Working with a surgeon who listened, respected my goals, and partnered with me made all the difference.” ●

Learn more about Hoag’s Women’s Health Institute at [hoag.org/womenshealth](https://www.hoag.org/womenshealth).

More Than a Diagnosis

Cyclist Gets Back on the Road After Successful Hip Replacement Surgery

For more than 17 years – 6,420 consecutive days to be exact – Ron Rand, a Long Beach resident and veteran aircraft carrier pilot, climbed into the saddle of his red road bike. Every day. Rain or shine. He even rode his bike the same day he had his appendix removed so as not to break his streak of continuous saddle time.

Ron's daily rides started as a personal goal to get more fit, but they soon evolved into a driving force in his daily life, with the wind in his hair fueling a passion for cycling that he couldn't deny.

Eventually, however, all those miles started to take a toll on Ron's body.

He began experiencing constant leg pain on his daily 10-mile rides around Long Beach.

At first, he chalked it up to sciatica, but imaging revealed the cartilage in his hip socket was

completely worn away. His hip joint was bone on bone, and his streak was at stake.

Ron's doctors recommended he travel to the Hoag Orthopedic Institute, which performs the highest volume of hip replacement surgeries in the Western United States. There, he connected with Dr. Michael Hunter, one of the institute's affiliated joint replacement orthopedic surgeons.

After a comprehensive exam and further imaging, Dr. Hunter confirmed Ron needed a left hip replacement.

"It was an instant bonding with Dr. Hunter," Ron says. "I trusted his judgment and experience. Plus, he had the same name as my dog, Hunter, and I took that as a good sign."

On the morning of surgery, Ron had one more surprise: going for one last cycle to keep the streak alive.



"When he told me he cycled that morning, I just shook my head in amazement," Dr. Hunter says.

| "I've never had a patient so dedicated."

Dr. Hunter performed a successful anterior hip replacement – a muscle-sparing, minimally invasive surgery that replaces a damaged hip joint through the front of the hip, rather than the side or back. The surgery lasted less than an hour and offered Ron a faster initial recovery and lower dislocation risk.

When Ron awoke from surgery, he told Dr. Hunter he was ready to cycle the next day.

"Not medically advisable," Dr. Hunter says.

Ron was, however, able to go home from surgery the very same day and was back in the saddle less than one week after his surgery. While he was

anxious to hop back on the bike, Dr. Hunter advised him to start with the stationary bike at physical therapy for a few days first.

Ron has restarted his streak and can be seen back cycling around the Long Beach Marina.

"I am so thankful for the Hoag Orthopedic Institute and Dr. Hunter," Ron says. "They got me back on the road."

The Hoag Orthopedic Institute is proudly physician-owned in partnership with Hoag Hospital and top orthopedic surgeons. [Learn more at hoagorthopedicinstitute.com.](https://www.hoagorthopedicinstitute.com)

At the *Edge* of *Possible*

This is where medicine moves forward.
From breakthrough technologies to pioneering
treatments and clinical research, discover how
Hoag is expanding what's possible – and bringing
tomorrow's care to patients today.

At the Edge of Possible

Reengineering the Immune System: How Cell Therapy Is Expanding Cancer Care at Hoag



Dr. Pooja Motwani, medical oncologist

Cancer treatment is evolving beyond conventional chemotherapy and radiation into an era where a patient's own immune system can be enhanced and deployed to target tumors. At the Hoag Family Cancer Institute, cell therapy is no longer a future concept; it is an expanding clinical reality built through years of research, collaboration, and investment in specialized care.

"Cell therapy represents a fundamental shift in how we treat cancer," says Dr. Pooja Motwani, Medical Director, Benign and Malignant Hematology.

"Instead of targeting cancer from the outside, we're empowering the immune system from within."

Hoag has built a multidisciplinary team spanning hematology-oncology, nursing, pharmacy, infusion services, research coordination, and inpatient care – ensuring patients are supported at every step of treatment.

Cell therapy includes several modalities that use immune cells from a patient or donor to better identify and attack cancer cells.

One method is chimeric antigen receptor T-cell therapy, or CAR-T. This approach involves collecting T cells – immune cells that help the body fight disease – from a patient's blood through a process called apheresis. The cells are then modified in a specialized laboratory and infused back into the patient to generate a targeted immune response.

Another approach uses bispecific T-cell engager antibodies, or BiTEs. These therapies act like a connector, bringing the body's own immune cells directly to cancer cells so they can recognize and destroy them.

For some hard-to-treat blood cancers, including certain lymphomas and multiple myeloma, these therapies have already changed what's possible. Many patients who previously had

limited options are now seeing long-lasting responses. Delivering these treatments requires highly specialized infrastructure, including cellular processing, pharmacy oversight, inpatient monitoring, and specialized nursing care. Both CAR-T therapies and bispecific antibodies (BiTEs) are now available to patients at Hoag.

Clinical trials are advancing these treatments even further. Hoag is a leader in phase I cellular therapy trials, offering studies for cancers such as melanoma and pancreatic cancer, and is preparing to open trials for patients with neurological and rheumatological conditions.

Leading the program's expansion alongside Dr. Motwani is Dr. Raghuvier Ranganathan, Medical Director of the Immune Effector and Cellular Therapy Program, recruited to extend its reach beyond oncology into autoimmune conditions such as multiple sclerosis and lupus.

"Cell therapy isn't just about delivering a product," Dr. Ranganathan says. "It's about creating a system that safely supports patients before, during, and long after infusion."

Looking ahead, Hoag's cell therapy expertise will continue to grow. Beginning in spring 2026, Hoag plans to offer tumor-infiltrating lymphocyte therapy for patients with metastatic melanoma, while research collaborations continue exploring similar approaches for autoimmune diseases.

At Hoag, cell therapy is not a single breakthrough. It is a growing platform designed to bring the next generation of cancer and immune-based care to Orange County – today and into the future. ●

Learn more about the Hoag Family Cancer Institute at hoag.org/cancer.



Dr. Phoenix Nguyen, gastroenterologist; Dr. Jennifer Phan, gastroenterologist; Dr. David Ahn, endocrinologist

At the Edge of Possible

A New Frontier in Treating Diabetes and Obesity

For decades, treatment for type 2 diabetes and obesity has focused on medications or surgery.

Today, a new approach looks beyond the pancreas to the small intestine, now understood to play a powerful role in metabolic health. Hoag physicians are at the forefront of this field, known as metabolic endoscopy.

“These conditions aren’t just about the pancreas,” explains Dr. Jennifer Phan, gastroenterologist and Medical Director for the Hoag Irvine Advanced Endoscopy Center, who is leading two trials at Hoag.

“The small intestine acts like a conductor, communicating with the brain and pancreas

to regulate blood sugar. In some patients with type 2 diabetes, that signaling becomes disrupted.”

Duodenal metabolic endoscopy is a group of minimally invasive procedures designed to improve glucose control in patients with type 2 diabetes and obesity by targeting the lining of the duodenum.

Using electrical energy, vapor, or other approaches, the procedures aim to promote gentle shedding of unhealthy duodenal cells, allowing healthier tissue to regrow and restore metabolic signaling.

Hoag is currently the only hospital in the country offering clinical trials in all three available technologies.

These trials are part of Hoag’s Weight and Metabolic Center of Excellence, where multidisciplinary teams bring together advanced endoscopy, endocrinology, and nutrition. By uniting clinical care and research, Hoag is advancing options for patients who need more than medication alone but may not be candidates for traditional weight loss surgery.

Early data from international and U.S. studies are promising. In some trials, patients have experienced meaningful reductions in hemoglobin A1C levels following a single outpatient procedure. The goal is not to replace healthy lifestyle changes, but to help patients reduce medication burden, prevent progression to insulin therapy, and gain better metabolic control.

“These procedures are done endoscopically and on an outpatient basis,” Dr. Phan says. “Most patients go home the same day, with minimal recovery time.”

The research is conducted in collaboration with endocrinology specialists, including Dr. David Ahn, Dr. Kris V. Iyer Endowed Chair in Diabetes Care at the Mary & Dick Allen Diabetes Center, who serves as principal investigator across all three trials; and Dr. Phoenix Nguyen, gastroenterologist and Medical Director of the Hoag Advanced

Endoscopy Center, who is principal investigator of the duodenal mucosal resurfacing study.

Hoag’s leadership in metabolic endoscopy is fueled by physician expertise and a community engaged in advancing care.

Medical device companies continue to seek partnerships with Hoag because of its strong clinical and research infrastructure, and because Hoag patients are informed and open to research participation. That combination allows new technologies to be studied responsibly while giving patients access to emerging therapies.

While these technologies remain pre-FDA and several years from potential commercial availability, Hoag’s role reflects a broader commitment to innovation and early access to promising advances in care.

“As these therapies evolve,” Dr. Phan says, “the potential to change how we treat metabolic disease is real. And it’s exciting to be part of that progress.” ●

To learn more about Hoag’s clinical trials, call (949) 764-4577 or email clinicalresearch@hoag.org.

Technology Type	Sponsor	Primary Focus	Principal Investigators	Actively Enrolling
Duodenal Mucosal Resurfacing	Fractyl	Obesity	Dr. David Ahn (endocrinology); Dr. Phoenix Nguyen (GI)	Closed
Duodenal Revitalization (electroporation)	Endogenex	Type 2 diabetes and mellitus	Dr. David Ahn (endocrinology); Dr. Jennifer Phan (GI)	Yes
Duodenal Vapor Therapy	Aqua	Type 2 diabetes and mellitus	Dr. David Ahn (endocrinology); Dr. Jennifer Phan (GI)	Yes

Small Habits, *Big Health*

Better health starts with everyday choices. Hoag experts provide practical, approachable guidance to help people feel better now, stay healthier longer, and take confident steps toward lifelong well-being.

Small Habits, Big Health

Ask a Doctor: What Symptoms Do Patients Overlook?



Dr. Yeseo Han
Family Medicine

Q What do you wish more patients understood about the symptoms they ignore, and when's a good time to take action?

A One of the most important things I try to help patients understand is you don't need a dramatic or alarming symptom to benefit from primary care. Many of the things people live with every day – such as persistent fatigue, frequent heartburn, disrupted sleep, shortness of breath with routine activity, ongoing headaches, changes in bowel habits, or unexplained weight changes – are often brushed off as stress, aging, or “just how life is.” Sometimes they are. But sometimes they're early signals that something deeper is going on.

I also see people normalize behaviors that shouldn't be normal, like taking antacids or pain relievers daily, feeling constantly run-down, or assuming brain fog and mood changes are unavoidable. These patterns matter. Primary care is about recognizing trends over time and addressing small issues before they become bigger ones.

Spring is an especially good time to come in because it naturally lends itself to a reset.

Think of spring cleaning for your health. Schedules tend to be more predictable, people are thinking about being more active, and it's a great moment to take stock of your health before summer travel and busy routines begin. From a medical standpoint, spring visits allow us to review preventive screenings, check blood pressure and labs, update vaccinations, and talk through seasonal concerns like allergies, sleep, nutrition, and exercise.

What I want patients to know is that most visits aren't about delivering bad news. They're about reassurance, prevention, and partnership. A primary care doctor isn't just there to treat illness – we get to know your health history, your lifestyle, and how things change over time. That long-term relationship helps us spot subtle shifts early and guide decisions with your full story in mind. And if you ever need specialized care, you have easy access to Hoag's many specialists.

Primary care works best when it's proactive, not reactive. You don't need to wait until something feels urgent. If something feels “off,” or if it's simply been a while since your last visit, spring is a perfect time to check in. Listening to your body and starting the conversation early is one of the simplest ways to protect your long-term health.

Dr. Yeseo Han is a family medicine physician who practices at Hoag Medical Group's location in Newport Beach at 22 Corporate Plaza. ●

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